

RESIDENTIAL CHANGES

County of Stafford

Department of Public Works
PO Box 339
1300 Courthouse Rd.
Stafford, Virginia
22555-0339
(540) 658-8650
www.co.stafford.va.us



RECEIVED BY: _____

DATE: _____

R/E TAXES CURRENT: _____

A/P: _____

PARENT A/P: _____

JOB LOCATION

STREET ADDRESS: _____

TAX MAP #: _____ SECTION: _____ LOT: _____

SUBDIVISION: _____

IS THERE A FIRE SUPPRESSION (SPRINKLER) SYSTEM IN THE HOME? ☐ YES ☐ NO

CURRENT OWNER INFORMATION

NAME: _____

CURRENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

BUILDING CONTRACTOR INFORMATION

☐ SAME AS OWNER

CONTRACTOR/ COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

PRINT NAME _____

SIGNATURE: _____

VIRGINIA CONTRACTORS LICENSE #: _____

LICENSE CLASS: _____ LICENSE DESIGNATION: _____ EXPIRATION DATE: _____

By signing the above, I certify that (1) I am duly licensed under the Virginia Code to perform the work contemplated by this application, and/or (2) I am authorized by the contractor stated above to sign on behalf of the contractor, which is duly licensed to perform the work contemplated by this application.

APPLICANT INFORMATION

☐ SAME AS CONTRACTOR ☐ SAME AS OWNER

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

TOTAL VALUATION

DECLARED PROJECT VALUE \$ _____
(Total contract value)

CALCULATED PROJECT VALUE \$ _____
(Per ICC)

A/P: _____

MECHANICAL CONTRACTOR INFORMATION

☐ SAME AS OWNER

CONTRACTOR/ COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

PRINT NAME _____

SIGNATURE: _____

VIRGINIA CONTRACTORS LICENSE #: _____

LICENSE CLASS: _____ LICENSE DESIGNATION: _____ EXPIRATION DATE: _____

ESTIMATED VALUE OF WORK: _____

By signing the above, I certify that (1) I am duly licensed under the Virginia Code to perform the work contemplated by this application, and/or (2) I am authorized by the contractor stated above to sign on behalf of the contractor, which is duly licensed to perform the work contemplated by this application.

ELECTRICAL CONTRACTOR INFORMATION

☐ SAME AS OWNER

CONTRACTOR/ COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

PRINT NAME _____

SIGNATURE: _____

VIRGINIA CONTRACTORS LICENSE #: _____

LICENSE CLASS: _____ LICENSE DESIGNATION: _____ EXPIRATION DATE: _____

ESTIMATED VALUE OF WORK: _____

By signing the above, I certify that (1) I am duly licensed under the Virginia Code to perform the work contemplated by this application, and/or (2) I am authorized by the contractor stated above to sign on behalf of the contractor, which is duly licensed to perform the work contemplated by this application.

PLUMBING CONTRACTOR INFORMATION

☐ SAME AS OWNER

CONTRACTOR/ COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

PRINT NAME _____

SIGNATURE: _____

VIRGINIA CONTRACTORS LICENSE #: _____

LICENSE CLASS: _____ LICENSE DESIGNATION: _____ EXPIRATION DATE: _____

ESTIMATED VALUE OF WORK: _____

By signing the above, I certify that (1) I am duly licensed under the Virginia Code to perform the work contemplated by this application, and/or (2) I am authorized by the contractor stated above to sign on behalf of the contractor, which is duly licensed to perform the work contemplated by this application.

PROJECT INFORMATION

A/P: _____

DESCRIPTION OF WORK

SQUARE FOOTAGE OF INVOLVED AREA

USBC Edition:	Basement:
	1st Floor:
	2nd Floor:
	3 rd Floor:
	Decks: Dimensions:
	Porches/Stoops: Dimensions:
	Garage/Carport:
	Gross Square Footage:
	Land Disturbance Gross Square Footage:

CHECK APPROPRIATE FIELD OR ENTER QUANTITY WHERE REQUIRED

_____ Addition	_____ Bedroom	_____ Hot Tub	_____ Porch, Enclosed (conditioned)
_____ Alteration	_____ Carport	_____ Other	_____ Porch, Screen
_____ Barn	_____ Deck	_____ Pool, Above Ground	_____ Roof
_____ Basement	_____ Foundation	_____ Pool, In-Ground	_____ Shed
_____ Basement Egress	_____ Garage, Attached	_____ Pool Deck	_____ Sunroom/ 3 Season Room
_____ Bathroom	_____ Garage, Detached	_____ Porch	_____ Window/Door

MECHANICAL

_____ HVAC/Mechanical	_____ # Fireplace Insert (select) Wood or Gas	_____ #Tank/Above Ground
_____ # Air Conditioner	_____ # Gas Appliances	_____ Gas Piping
_____ # Chimney Re-Line	_____ # Gas Logs	_____ # Heat Pumps
_____ # Fireplace (select) Masonry or Prefab Wood or Gas		_____ #Tank Removal
		_____ #Woodstove

ELECTRICAL

_____ Electrical	_____ Meter	_____ # Outdoor Light Pole
_____ # Alt. Energy Device	_____ Meter Upgrade	_____ # Sub Panel/ Transfer Switch
_____ Generator	_____ Temp Meter	_____ expire date _____

PLUMBING

_____ Plumbing	_____ Lawn Sprinkler	_____ Sewer Connect
_____ # Hot Water Heater	_____ Pipe Replacement	_____ Water Connect
_____ Interior Drain Tile	_____ Septic	_____ Well

TIME LIMITATION OF APPLICATION

2009 Virginia Uniform Statewide Building Code 108.8

An application for a permit for any proposed work shall be deemed to have been abandoned six months after the date of filing unless such application has been pursued in good faith or a permit has been issued, except that the building official is authorized to grant one or more extensions of time if a justifiable cause is demonstrated.

APPLICANT INITIALS: _____

APPLICANT AGREEMENT

All information on this form is part of the application and must be complied with. I hereby certify that I have authority to make this application, that the information is complete and correct and that the work performed and equipment installed will conform to the Virginia Uniform Statewide Building Code and other applicable laws and regulations which relate to the property.

NAME: _____

SIGNATURE: _____ DATE: _____

ISSUANCE OF PLANS OR APPROVED DOCUMENTS (COMPLETE AT PERMIT ISSUANCE)

I have received county approved plans or documents.

NAME: _____

SIGNATURE: _____ DATE: _____

OFFICE USE ONLY